

UCC-1

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

| | |
|---|--|
| A. NAME & PHONE OF CONTACT AT FILER [optional] AUTOMOTIVE FINANCE CORPORATION 317-843-4777 | |
| B. SEND ACKNOWLEDGMENT TO: (Name and Address) | |
| AUTOMOTIVE FINANCE CORPORATION 13085 HAMILTON CROSSING BLVD SUITE 300 CARMEL, IN 46032 US | |

State of New Jersey
Department of the Treasury
Division of Revenue
UCC Section
Filed
Filing Number:50483822
04/03/13 8:56:07

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

| | | | | |
|--|-----------------------------------|---|--|---|
| 1. DEBTOR'S EXACT FULL LEGAL NAME - Insert only one debtor name (1a or 1b) - do not abbreviate or combine names | | | | |
| 1a. ORGANIZATION'S NAME COSTAS AUTO GALLERY | | | | |
| OR | 1b. INDIVIDUAL'S LAST NAME | | FIRST NAME | MIDDLE NAME SUFFIX |
| 1c. MAILING ADDRESS 675 GARDEN STREET | | CITY ELIZABETH | STATE NJ | POSTAL CODE 07202 COUNTRY US |
| 1d. SEE INSTRUCTIONS | ADD'L INFO RE ORGANIZATION DEBTOR | 1e. TYPE OF ORGANIZATION Limited Liability Company | 1f. JURISDICTION OF ORGANIZATION NJ | 1g. ORGANIZATIONAL ID #, if any <input checked="" type="checkbox"/> NONE |
| 2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - Insert only one debtor name (2a or 2b) - do not abbreviate or combine names | | | | |
| 2a. ORGANIZATION'S NAME BAV AUTO L.L.C. | | | | |
| OR | 2b. INDIVIDUAL'S LAST NAME | | FIRST NAME | MIDDLE NAME SUFFIX |
| 2c. MAILING ADDRESS 675 GARDEN STREET | | CITY ELIZABETH | STATE NJ | POSTAL CODE 07202 COUNTRY US |
| 2d. SEE INSTRUCTIONS | ADD'L INFO RE ORGANIZATION DEBTOR | 2e. TYPE OF ORGANIZATION Limited Liability Company | 2f. JURISDICTION OF ORGANIZATION NJ | 2g. ORGANIZATIONAL ID #, if any <input checked="" type="checkbox"/> NONE |
| 3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - Insert only one secured party name (3a or 3b) | | | | |
| 3a. ORGANIZATION'S NAME AUTOMOTIVE FINANCE CORPORATION | | | | |
| OR | 3b. INDIVIDUAL'S LAST NAME | | FIRST NAME | MIDDLE NAME SUFFIX |
| 3c. MAILING ADDRESS WWW.AFCDEALER.COM, 13085 HAMILTON CROSSING B | | CITY CARMEL | STATE IN | POSTAL CODE 46032 COUNTRY US |

4. This FINANCING STATEMENT covers the following collateral:
All of debtors assets and properties wherever located, including without limitation: (a) accounts; chattel paper; deposit accounts; documents; equipment, fixtures, inventory, and other goods; general intangibles; instruments; insurance policies; investment property; letter of credit rights; money; software; supporting obligations; and titles, now owned or hereafter acquired by debtor, (b) any and all proceeds, products, additions, accessions, accessories, and replacements of the foregoing, and (c) all of debtors computer records, business papers, ledger sheets, files, books, and records relating to the foregoing, now owned or hereafter acquired.

| | | | | |
|--|--|--|--|--|
| 5. ALTERNATIVE DESIGNATION (if applicable): <input type="checkbox"/> LESSEE/LESSOR <input type="checkbox"/> CONSIGNEE/CONSIGNOR <input type="checkbox"/> BAILEE/BAILOR <input type="checkbox"/> SELLER/BUYER <input type="checkbox"/> AG. LIEN <input type="checkbox"/> NON-UCC FILING | | | | |
| 6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable) | | | | |
| 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (optional) <input type="checkbox"/> All Debtors <input type="checkbox"/> Debtor 1 <input type="checkbox"/> Debtor 2 | | | | |
| 8. OPTIONAL FILER REFERENCE DATA 430596ER | | | | |

FILING OFFICE COPY — UCC FINANCING STATEMENT (FORM UCC1) (REV. 05/22/02)

Ucc New Filing: 1/1

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

2023-01-28 P 11:35

| |
|---|
| A. NAME & PHONE OF CONTACT AT FILER (optional) |
| B. E-MAIL CONTACT AT FILER (optional) |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address) |
| Automotive Finance Corporation www.afdealer.com 13085 Hamilton Crossing Blvd, Suite 300 Carmel, IN 46032 |

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER

50483822 04/03/2013

1b. ☐ This FINANCING STATEMENT AMENDMENT is to be filed (for record)
(or recorded) in the REAL ESTATE RECORDS

Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13

2. ☐ **TERMINATION:** Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement

3. ☐ **ASSIGNMENT** (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9
For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8

4. ☐ **CONTINUATION:** Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

5. ☐ **PARTY INFORMATION CHANGE:**

Check one of these two boxes:

AND: Check one of these three boxes to:

This Change affects ☐ Debtor or ☐ Secured Party of record

☐ CHANGE name and/or address: Complete item 6a or 6b, and item 7a or 7b and item 7c

☐ ADD name: Complete item 7a or 7b, and item 7c

☐ DELETE name: Give record name to be deleted in item 6a or 6b

6. **CURRENT RECORD INFORMATION:** Complete for Party Information Change - provide only one name (6a or 6b)

| |
|-------------------------------|
| 6a. ORGANIZATION'S NAME |
| OR |
| 6b. INDIVIDUAL'S SURNAME |
| FIRST PERSONAL NAME |
| ADDITIONAL NAME(S)/INITIAL(S) |
| SUFFIX |

7. **CHANGED OR ADDED INFORMATION:** Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

| |
|-------------------------------|
| 7a. ORGANIZATION'S NAME |
| OR |
| 7b. INDIVIDUAL'S SURNAME |
| FIRST PERSONAL NAME |
| ADDITIONAL NAME(S)/INITIAL(S) |
| SUFFIX |

7c. MAILING ADDRESS

8. ☒ **COLLATERAL CHANGE:** Also check one of these four boxes: ☐ ADD collateral ☐ DELETE collateral ☒ RESTATE covered collateral ☐ ASSIGN collateral

Indicate collateral:

All of Debtors assets and properties wherever located, including without limitation: accounts, chattel paper, deposit accounts, documents, equipment, fixtures, inventory and other goods, general intangibles, instruments, insurance policies, investment property, letter of credit rights, money, software, supporting obligations, and titles, now owned or hereafter acquired by Debtor; any and all proceeds, products, additions, accessions, accessories, and replacements of the foregoing; and all of Debtors computer records, business papers, ledger sheets, files, books, and records relating to the foregoing, now owned or hereafter acquired.

9. **NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT:** Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)
If this is an Amendment authorized by a DEBTOR, check here ☐ and provide name of authorizing Debtor

| |
|---------------------------------------|
| 9a. ORGANIZATION'S NAME |
| Automotive Finance Corporation |
| OR |
| 9b. INDIVIDUAL'S SURNAME |
| FIRST PERSONAL NAME |
| ADDITIONAL NAME(S)/INITIAL(S) |
| SUFFIX |

10. **OPTIONAL FILER REFERENCE DATA:**

430596MB BAV AUTO L.L.C.

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

| | |
|---|------------|
| A. NAME & PHONE OF CONTACT AT FILER (optional) | |
| CHRISTEL MACKENZIE | 3177063483 |
| B. E-MAIL CONTACT AT FILER (optional) | |
| CHRISTEL.MACKENZIE@AUTOFINANCE.COM | |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address) | |
| CHRISTEL MACKENZIE 13085 HAMILTON CROSSING BLVD SUITE 300\ | |
| CARMEL, IN 46032 | |
| US | |

State of New Jersey
Department of the Treasury
Division of Revenue & Enterprise Services
UCC Section
Filed

Filing Number:50483822

10/09/17 10:10:30

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER
50483822

1b. ☐ This FINANCING STATEMENT AMENDMENT is to be filed [for record]
(or recorded) in the REAL ESTATE RECORDS
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5. ☐ **PARTY INFORMATION CHANGE:**

Check one of these two boxes:AND Check one of these three boxes to:This Change affects ☐ Debtor or ☐ Secured Party of record☐ CHANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c☐ ADD name: Complete item 7a or 7b, and item 7c☐ DELETE name: Give record name to be deleted in item 6a or 6b

6. **CURRENT RECORD INFORMATION:** Complete for Party Information Change - provide only one name (6a or 6b)

| | | | | |
|-------------------------|--------------------------|---------------------|-------------------------------|--------|
| 6a. ORGANIZATION'S NAME | | | | |
| OR | 6b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |

7. **CHANGED OR ADDED INFORMATION:** Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

| | | | | |
|--|--------------------------|--|--|--------|
| 7a. ORGANIZATION'S NAME | | | | |
| OR | 7b. INDIVIDUAL'S SURNAME | | | |
| INDIVIDUAL'S FIRST PERSONAL NAME | | | | |
| INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) | | | | SUFFIX |

| | | | | |
|---------------------|------|-------|-------------|---------|
| 7c. MAILING ADDRESS | CITY | STATE | POSTAL CODE | COUNTRY |
|---------------------|------|-------|-------------|---------|

8. ☐ **COLLATERAL CHANGE:** Also check one of these four boxes: ☐ ADD collateral ☐ DELETE collateral ☐ RESTATE covered collateral ☐ ASSIGN collateral

Indicate collateral:

9. **NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT:** Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)
If this is an Amendment authorized by a DEBTOR, check here ☐ and provide name of authorizing Debtor

| | | | | |
|--------------------------------|--------------------------|---------------------|-------------------------------|--------|
| 9a. ORGANIZATION'S NAME | | | | |
| AUTOMOTIVE FINANCE CORPORATION | | | | |
| OR | 9b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |

10. **OPTIONAL FILER REFERENCE DATA:**
430596CM BAV AUTO L.L.C.